

FOR INGIRUCIONS, SEE BACK OF FORMAL	~	FORM	STATEMENT
FOR INSTRUCTIONS, SEE BACK OF FORM CHECK ONE:	BAPR 15 AM	DR-1	OF
☑ This is an <b>initial*</b> Statement of Organization	Reserrom	(Rev. 01/2008)	ORGANIZATION
☐ This is an amended* Statement of Organization *An Initial Statement of Organization must be filed within 10 days of the co.		For Office Use	Only
making expenditures, or incurring indebtedness exceeding \$750. Amendr	mmittee's accepting contributions, nents must be filed within 30 days of	Comm. #	
a change. Penalties may be imposed for late-filed Statements of Organiza	ation. A candidate with an open	Audited	
committee that exceeds \$750 in activity for another office shall file within 1 DR-1 disclosing information concerning the campaign for the new office ac	0 days either ≥ new or amended	Computer	
COMMITTEE NAME   (A candidate's committee must include the candidate's last name in the name of the committee.)			
John Campbell for Auditor			
MPORTANT: Indicate type of committee you are reporting for:			
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) Statewide PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC			
(10)School Board or Other Political Subdivision PAC (11) Local Ballot Issue(including committee involved in multiple city/county ballot Issues)			
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHARR (mand	atom except for a	
Alama III	Name + +	A COPTION	Sellorosta 2 collection)
Vanet M.C. Hofmeyer	$\sim$	<u></u>	
Mailing Address 1319 Oak St.	Mailing Address ↓ ↓		
City State	City. State ↓ ↓ Zip Code ↓ ↓		
Delwein TA 50662			
Phone (319) 283 2038	Phone ( )		
	. A della		
e-Mail INDICATE PURPOSE OF COMMITTEE - Check One Box  A	e-Mail	dvocate for ballot is:	RUB(S)
Comment or description:	_ A	dvocate against bal	lot issue(s)
All Candidates Enter: , A	County/Local Candidates a	ind Local Ballot Co	mmittees Enter:
Office Sought: Fayethe Lix, Thy auditor	- county: Fauette		
Political Party (if applicable) Republican	(If active in multiple ballot iss	ue elections, attach	list of counties
District:	Date of Election: General	ry June 3, 6	2008 2008
Year Standing for Election: _2008	· · · · · · · · · · · · · · · · · · ·		
Bank Account Name	Candidate name & Address of	arent Entity (PAC	s. if applicable),
Bank Account Name	Candidate name & Address of		s. if applicable),
Benk Account Name  John D Campbell  John Campbell to- Auditor  John Campbell to- Auditor	John Camp	arent Entity (PAC	s. if applicable),
Bank Account Name	Tohn Camp Mailing Address	Parent Entity (PAC Amiliate, or Sponso	s. if applicable),
Sank Account Name  JOhn D Campbell  John Campbell to Auditor  Name of Financial Institution/type of Account	John Camp	Parent Entity (PAC Amiliate, or Sponso	s. if applicable),
Benk Account Name  John D Campbell  John Campbell to- Auditor  John Campbell to- Auditor	Tohn Camp Mailing Address	Parent Entity (PAC Amiliate, or Sponso	X \ \ \ \ Zip \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Bank Account Name  John D Campbell  John Campbell to - Auditor  Name of Financial Institution/type of Account  First National Bank Checking  Mailing Address +	Tohn Camp Mailing Address  263 E harrabe	Parent Entity (PAC Amiliate, or Sponso	s. if applicable),
Sank Account Name  JOHN D Campbell  JOHN Campbell to Ruditor  John Campbell to Ruditor  Name of Financial Institution/type of Account  First National Bank Checking	Candidate name & Address or &  Tohn Camp  Mailing Address  City Larrabe  Hawkeye	Parent Entity (PAC Amiliate, or Sponso	X \ \ \ \ Zip \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Sank Account Name  John D. Campbell  John Campbell  John Campbell  Name of Financial Institution/type of Account  First National Bank (hecking  Mailing Address  IIS N Pine St. Box 233  City State 1 Zip 1	Tohn Camp Mailing Address City Hawkeye Phone (663)  Land Haman  Candidate name & Address  City	Parent Entity (PAC Amiliata, or Sponso bell E. PO BO: State + +	x 167 210 5a147
Sank Account Name  JOHN D. Campbell  John Campbell to Auditor  John Campbell to Auditor  Name of Financial Institution/type of Account  First National Bank Checking  Mailing Address 1  115 N. Pine St., Box 233	Candidate name & Address or &  Tohn Camp  Mailing Address  City Larrabe  Hawkeye	Parent Entity (PAC Amiliata, or Sponso bell E. PO BO State + +	x 167 210 5a147
Sank Account Name  John D. Campbell  John Campbell to Auditor  Name of Financial Institution/type of Account  First National Bank (hecking  Mailing Address + + Box 233  City + State + Zip + +  West Union IA 53/15	Candidate name & Address or Standard Mailing Address Address Address Address Address Or Standard Mailing Address O	Parent Entity (PAC Amiliata, or Sponso bell E. PO BO State + +	x 167 210 5a147
Sank Account Name  John D. Campbell  John Campbell  John Campbell  Name of Financial Institution/type of Account  First National Bank (hecking  Mailing Address  IIS N Pine St. Box 233  City State 1 Zip 1	Candidate name & Address or Standard Mailing Address Address Address Address Address Or Standard Mailing Address O	Parent Entity (PAC Amiliata, or Sponso bell E. PO BO State + +	x 167 210 5a147
Sank Account Name  John D. Campbell  John Campbell  John Campbell  Name of Financial Institution/type of Account  First National Bank Checking  Mailing Address  ITS N Pine St. Box 233  City State T Zip T  LUCST LUCION TA 53/15  STATEMENT OF AFFIRMATION: By filling this document the committee at 1. The committee and all persons connected with the committee understand the committee and all persons connected with the committee understand the committee and all persons connected with the committee understand the committee and all persons connected with the committee understand the committee and all persons connected with the committee understand the committee and all persons connected with the committee understand the committee and all persons connected with the committee and all	Candidate name & Address or a Composition of the Co	Parent Entity (PAC Amiliate or Sooned bell be, PO BO State + + IA H57 Hins net	X167 210 Sa147
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Sank Account Name  John D. Campbell to - Auditor  John Campbell to - Auditor  Name of Financial Institution/type of Account  First National Bank Checking  Mailing Address  LIS N Pine St. Box 233  City to State to Zip to Zi	Candidate name & Address or Salar Address or Salar Address Add	Parent Entity (PAC Amiliate or Sooned bell state + + IA H57 chins net ode chapters dealand	1 688 and the administrative
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